

## PROJECT 10073 RECORD

1. DATE - TIME GROUP 15-20 Oct 67	2. LOCATION Thibodaux, La.
3. SOURCE Civilian	10. CONCLUSION INSUFFICIENT DATA FOR EVALUATION
4. NUMBER OF OBJECTS 1	
5. LENGTH OF OBSERVATION 30 to 90 seconds	11. BRIEF SUMMARY AND ANALYSIS The observer sighted a bright white self luminous object. When it was first seen it was stationary but after about 5 seconds it began to move and to change to an orange color. It then speeded away at a very fast speed.
6. TYPE OF OBSERVATION Ground Visual	
7. COURSE Conflicting	Comments: The observer first reported the object moved in a southeasterly direction but later reported it as moving in a westerly direction. The case was not submitted until Feb 68 at which time it was too late to investigate it.
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

FORM

FTD SEP 63 0-329 (TDE) Previous editions of this form may be used.

22. HAVE YOU EVER SEEN THIS OR A SIMILAR PHENOMENON BEFORE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF "YES," GIVE DATE AND LOCATION.			
23. WAS ANYONE WITH YOU AT THE TIME YOU SAW THE PHENOMENON? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO. IF "YES," DID THEY SEE IT TOO? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO.			
A. LIST THEIR NAMES AND ADDRESSES			
[REDACTED] daux La.			
24. GIVE THE FOLLOWING INFORMATION ABOUT YOURSELF			
LAST NAME FIRST NAME MIDDLE NAME [REDACTED] Paul			
ADDRESS (Street, City, State and Zip Code) [REDACTED]			
TELEPHONE (Area and number) [REDACTED]	AGE 15 at I#23-63	* MALE	FEMALE
INDICATE ADDITIONAL INFORMATION INCLUDING OCCUPATION AND ANY EXPERIENCE WHICH MAY BE PERTINENT.			
At present I work with my dad painting.			
25. WHEN AND TO WHOM DID YOU REPORT THAT YOU HAD SIGHTED THIS PHENOMENON?			
NAME TO NO ONE DAY MONTH YEAR			
26. DATE YOU COMPLETED THIS QUESTIONNAIRE.			
DAY 2 MONTH 16 YEAR 1968			

27. INFORMATION WHICH YOU FEEL IS PERTINENT BUT WHICH IS NOT ADEQUATELY COVERED IN THIS QUESTIONNAIRE, ALTERNATIVELY PROVIDE A NARRATIVE EXPLANATION OF THE SIGHTING.

I am not positive of what I saw or what I thought I saw. This could be an illusion or any thing else. I am not saying it was a flying saucer but I'm saying it was anything else either.

Thank/~~you~~ you for your time.

[REDACTED]

Project Blue Book  
Wright Patterson A.F.B.  
Dayton, Ohio

Dear Sirs:

I hesitate to write for the second time, but I read in a book about getting information on U.F.O.'s at this address and I am very interested in this information. When I first heard of this U.F.O. business I thought it was nonsense but about two months ago I was in Louisiana with my mother who has died recently. Me and a couple of other boys were in our backyard playing a game and one of them said to look up at a white glowing light in the sky over the sugarcane field. We all looked up and saw it, but about the time I looked up it started moving to my left and as it speeded up it turned to a bright orange. After it left sight me and a companion was talking about it and he said that about nine months before he and his friend saw an exact sighting of that one but it was one and a half blocks away. The light was approximately 80 to 100 feet off of the ground and moved toward a southeasterly direction. I would say that it picked up about 30 M.P.H. a second and in 5 seconds it was going about 200 or more M.P.H.

Dear Sirs, I am not sure of what I saw or what I think I saw but I am still interested in any information you can send.

Thank you for your time and please send some information.

Yours truly,

MY ADDRESS:

recon

Write soon if possible.

DEPARTMENT OF THE AIR FORCE  
HEADQUARTERS FOREIGN TECHNOLOGY DIVISION (AFSC)  
WRIGHT-PATTERSON AIR FORCE BASE, OHIO 45433



15 FEB 1978

REPLY TO  
ATTN OF:

TDPT/UFO

SUBJECT:

UFO Observation.

TO:

[REDACTED]  
Muleshoe, Texas 79347

Reference your recent unidentified flying object sighting which you reported to the Air Force. The information which we have received is not sufficient for a scientific investigation. Request you complete the attached AF Form 117 and return it in the self-addressed envelope. Thank you for reporting your observation to the Air Force.

*JCM*  
JAMES C. MANATT, Colonel, USAF  
Director of Production

1 Atch  
AF Form 117

*Sent 2/17/78  
Bridgette & Cecil Webster*

200-70668

AFR 80-17(C1)

# SIGHTING OF UNIDENTIFIED PHENOMENA QUESTIONNAIRE

BUDGET BUREAU APPROVAL  
NUMBER 21-R253

THIS QUESTIONNAIRE HAS BEEN PREPARED SO THAT YOU CAN GIVE THE U.S. AIR FORCE AS MUCH INFORMATION AS POSSIBLE CONCERNING THE UNIDENTIFIED PHENOMENON THAT YOU HAVE OBSERVED. PLEASE TRY TO ANSWER ALL OF THE QUESTIONS. THE INFORMATION YOU GIVE WILL BE USED FOR RESEARCH PURPOSES. YOUR NAME WILL NOT BE USED IN CONNECTION WITH ANY OF YOUR STATEMENTS OR CONCLUSIONS WITHOUT YOUR PERMISSION. RETURN TO AIR FORCE BASE INVESTIGATOR FOR FORWARDING TO FTD (TDETR), WRIGHT-PATTERSON AFB, OHIO 45433, IAW AFR 80-17. (IF ADDITIONAL SHEETS ARE NEEDED FOR NARRATIVE OR SKETCHES ATTACH SECURELY TO THIS FORM OR ANNOTATE WITH YOUR NAME FOR IDENTIFICATION.)

1. WHEN DID YOU SEE THE PHENOMENON? *uncertain on Day*  
DAY *15-20th* MONTH *Oct.* YEAR *1967*

2. WHAT TIME DID YOU FIRST SIGHT THE PHENOMENON?  
HOUR *7pm.* MINUTES *42 after* ☐ A.M. ☒ P.M.

3. WHAT TIME DID YOU LAST SIGHT THE PHENOMENON?  
HOUR *7pm.* MINUTES *42 after* ☐ A.M. ☒ P.M.

4. TIME ZONE ☐ DAYLIGHT SAVINGS ☐ STANDARD  
☐ EASTERN ☒ CENTRAL ☐ MOUNTAIN ☐ PACIFIC ☐ OTHER

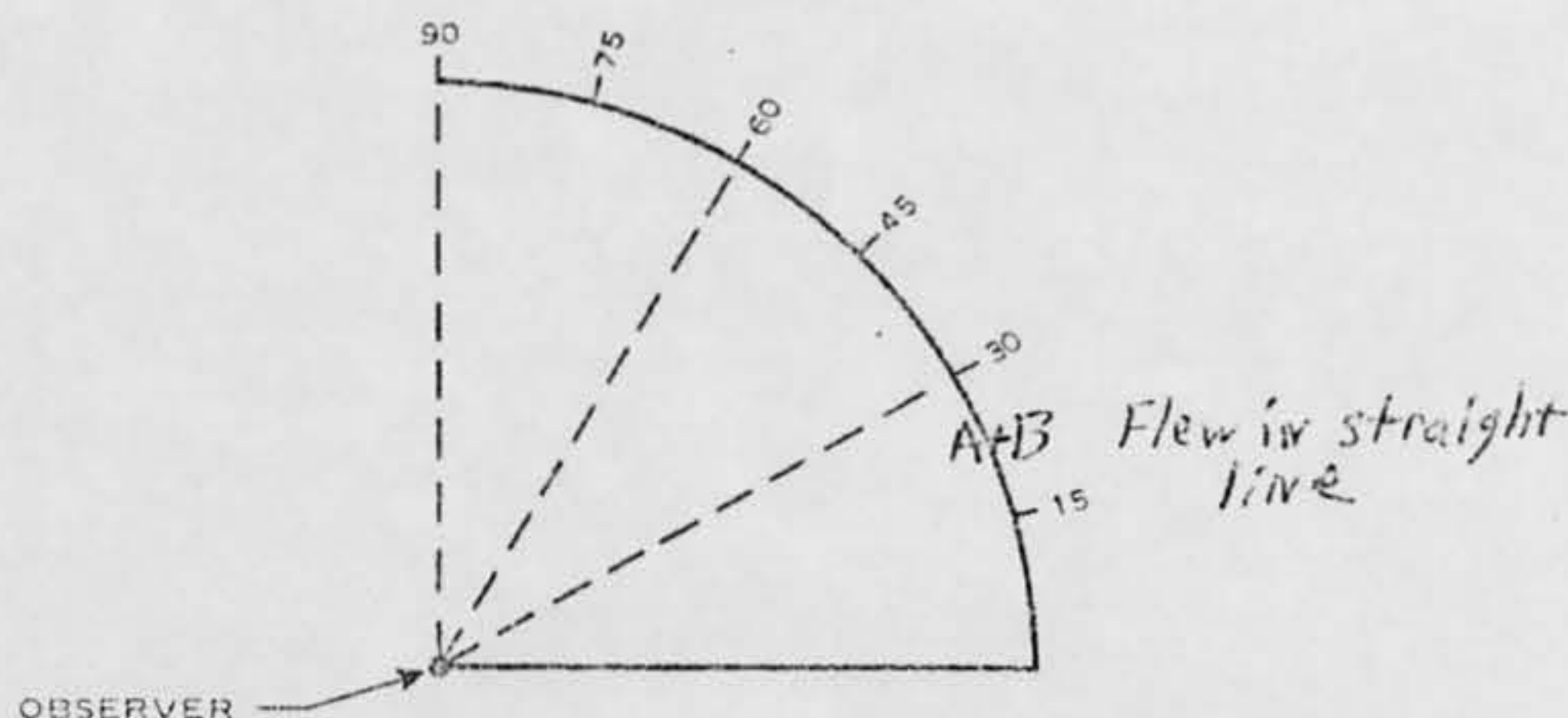
5. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? IF IN CITY, GIVE THE NEAREST STREET ADDRESS AND INDICATE ON A HAND DRAWN MAP WHERE YOU WERE STANDING WITH REFERENCE TO THE ADDRESS. IF IN THE COUNTRY, IDENTIFY THE HIGHWAY YOU WERE ON OR NEAR AND TRY TO FIX A DISTANCE AND DIRECTION FROM SOME RECOGNIZABLE LANDMARK.

*This is  
North of Hibbard La.*

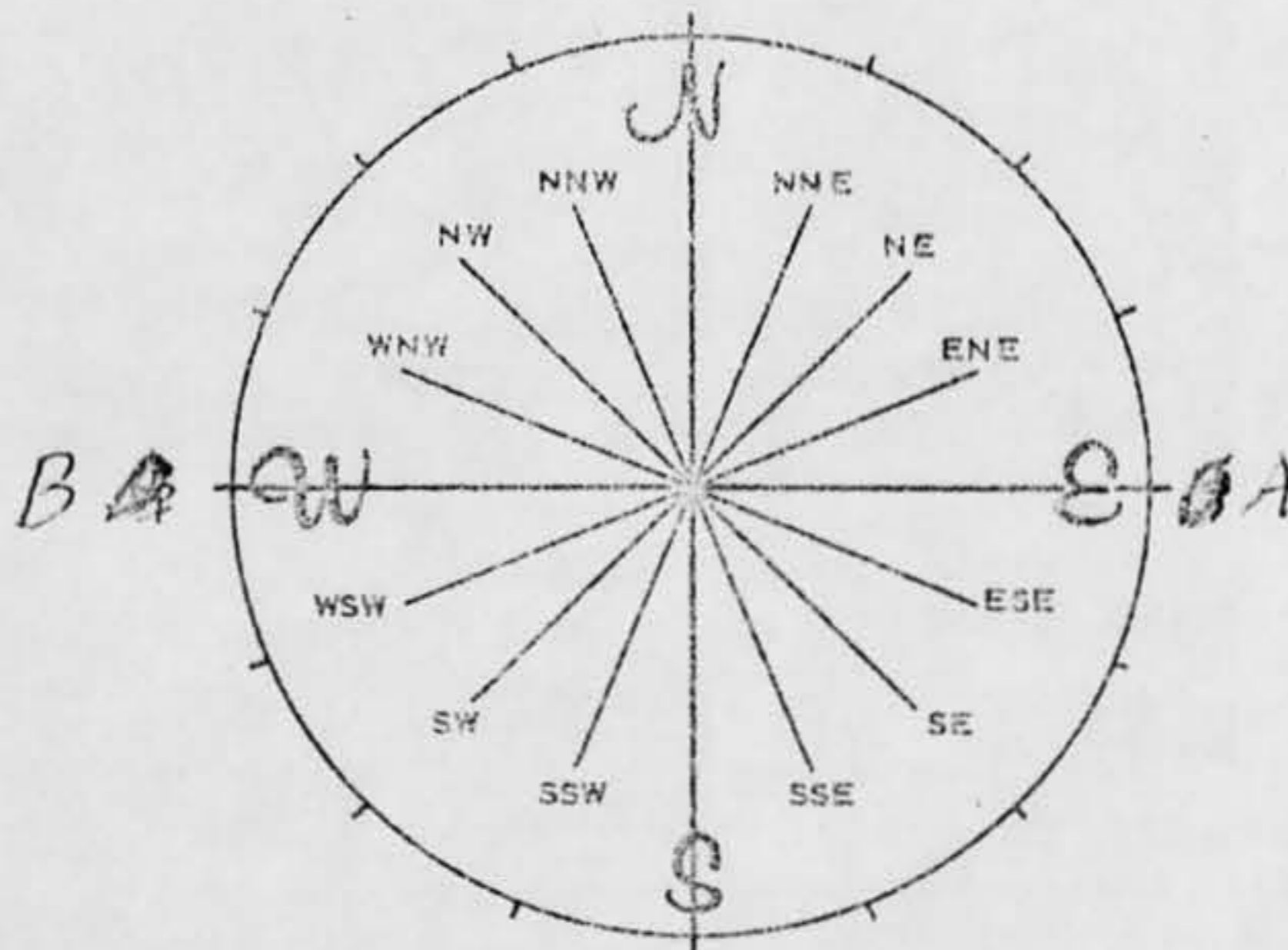
*Sugar Cane Field*

*(X) Sighting*

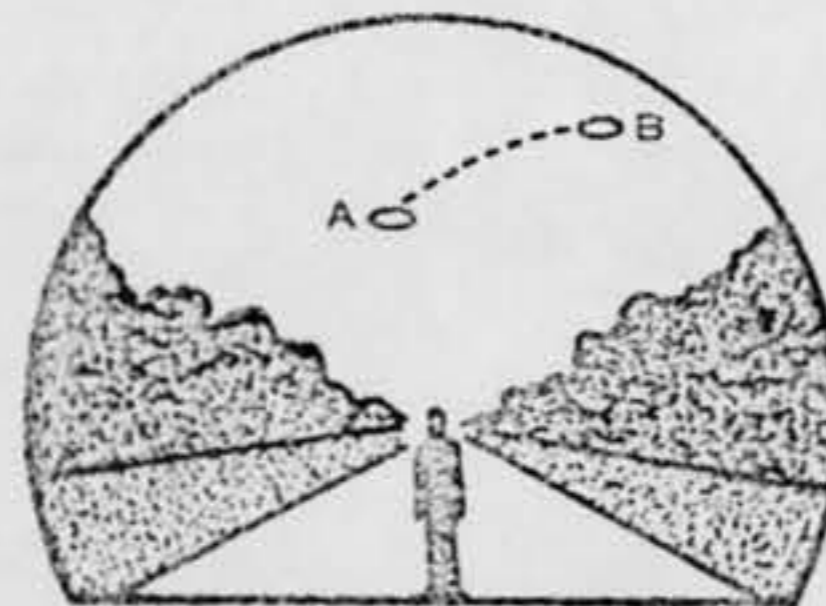
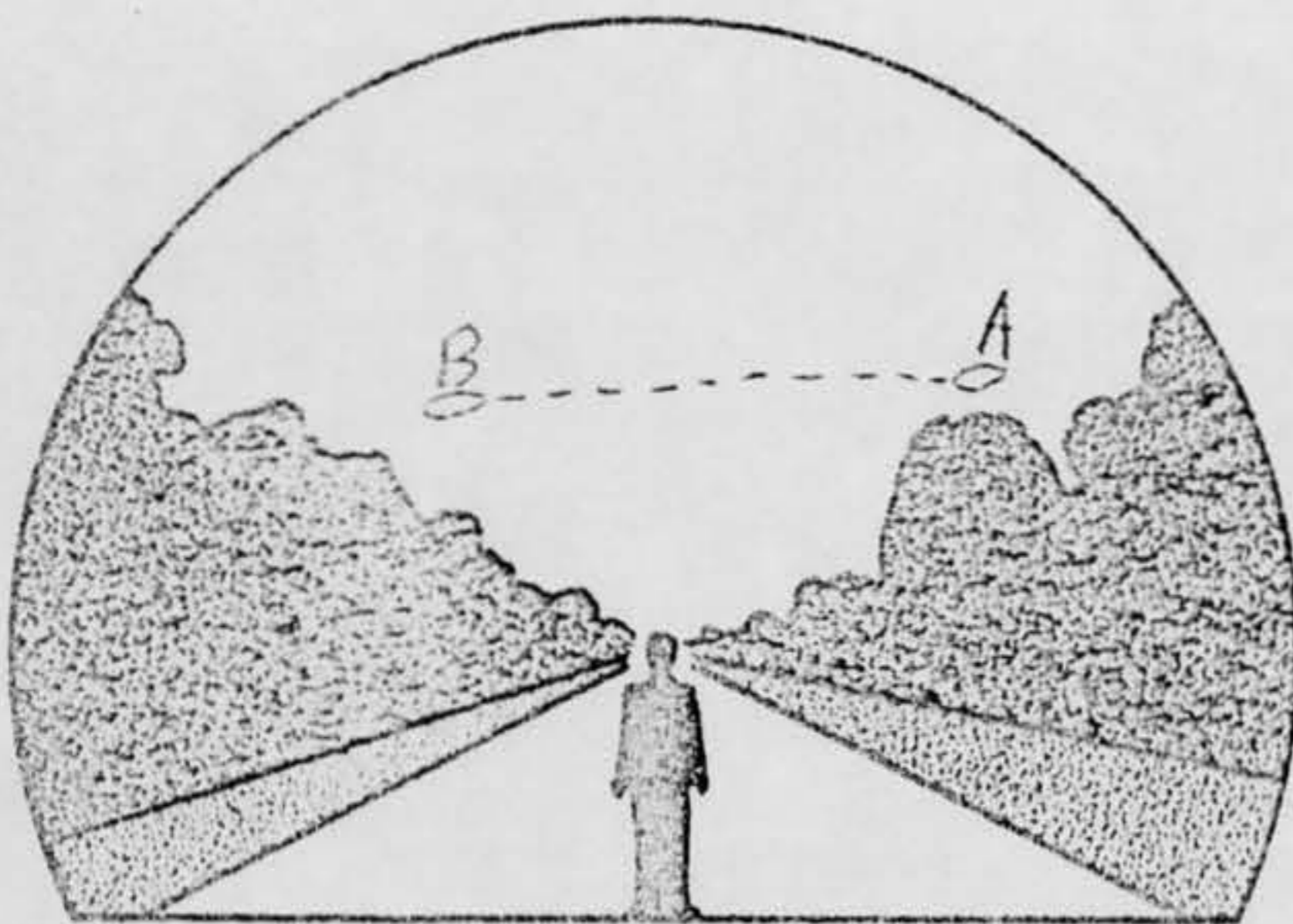
6. IMAGINE YOU ARE AT THE POINT SHOWN IN THE SKETCH, PLACE AN "A" ON THE CURVED LINE TO SHOW HOW HIGH THE PHENOMENON WAS ABOVE THE HORIZON, OR SKYLINE, WHEN FIRST SEEN. PLACE A "B" ON THE SAME CURVED LINE TO SHOW HOW HIGH ABOVE THE HORIZON THE PHENOMENON WAS WHEN LAST SEEN.



6A. NOW IMAGINE YOU ARE AT THE CENTER OF THE COMPASS ROSE. PLACE AN "A" ON THE COMPASS TO INDICATE THE DIRECTION TO THE PHENOMENON WHEN FIRST SEEN. PLACE A "B" ON THE COMPASS TO INDICATE THE DIRECTION TO THE PHENOMENON WHEN LAST SEEN.



7. IN THE SKETCH BELOW, PLACE AN "A" AT THE POSITION OF THE PHENOMENON WHEN FIRST SEEN, AND A "B" AT THE POSITION OF THE PHENOMENON WHEN LAST SEEN. CONNECT THE "A" AND "B" WITH A LINE TO APPROXIMATE THE MOVEMENT OF THE PHENOMENON BETWEEN "A" AND "B". THAT IS, SCHEMATICALLY SHOW WHETHER THE MOVEMENT APPEARED TO BE STRAIGHT, CURVED OR ZIG-ZAG. REFER TO SMALLER SKETCH AS AN EXAMPLE OF HOW TO COMPLETE THE LARGER SKETCH.



B. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? (Check appropriate blocks.)			
<input checked="" type="checkbox"/>	OUTDOORS		IN BUSINESS SECTION OF CITY
	IN BUILDING		IN RESIDENTIAL SECTION OF CITY
	IN CAR <input type="checkbox"/> AS DRIVER <input type="checkbox"/> AS PASSENGER		IN OPEN COUNTRYSIDE
	IN BOAT		NEAR AIRFIELD
	IN AIRPLANE <input type="checkbox"/> AS PILOT <input type="checkbox"/> AS PASSENGER		FLYING OVER CITY
<input checked="" type="checkbox"/>	OTHER <i>Playing games</i>	<input checked="" type="checkbox"/>	OTHER <i>on side of a field</i>
A. IF YOU WERE IN A VEHICLE, COMPLETE THE FOLLOWING:			
WHAT DIRECTION WERE YOU MOVING?		HOW FAST WERE YOU MOVING?	
<input checked="" type="checkbox"/>	NORTH		EAST
	SOUTH		WEST
	NORTHEAST		SOUTHEAST
	NORTHWEST		SOUTHWEST
		1 M.P.H. (approximately)	
		DID YOU STOP ANYTIME WHILE OBSERVING THE PHENOMENON?	
		<input type="checkbox"/> YES <input type="checkbox"/> NO	
EXPLAIN WHETHER SUCH MOVEMENT AFFECTS YOUR SKETCHES IN ITEMS 5 AND 6			
<i>Not in this instance. I stopped before it moved.</i>			
DESCRIBE TYPE OF VEHICLE YOU WERE IN AND TYPE OF ROAD, TERRAIN OR BODY OF WATER YOU TRAVERSED DURING THE SIGHTING. STATE WHETHER WINDOWS OR CONVERTIBLE TOP WERE UP OR DOWN.			
<i>Flat lane, except for ditch and Bayou, and cane field.</i>			
HOW MUCH OTHER TRAFFIC WAS THERE?			
<i>No traffic for 5-10 min. before and after sighting.</i>			
DID YOU NOTICE ANY AIRPLANES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF "YES," DESCRIBE WHEN THEY WERE IN SIGHT RELATIVE TO THE TIME OF SIGHTING THE PHENOMENON AND WHERE THEY WERE IN THE SKY RELATIVE TO THE POSITION OF THE PHENOMENON.			
<i>there was a satellite about 30 min. later.</i>			
<i>We got out car telescope and watched the satellite for about 10 min.</i>			
9. HOW LONG WAS THE PHENOMENON IN SIGHT?			
LENGTH OF TIME		CERTAIN OF TIME	NOT VERY SURE
<i>1/2 min to 1 1/2 min.</i>		<input checked="" type="checkbox"/> FAIRLY CERTAIN	JUST A GUESS
HOW WAS TIME DETERMINED?			
<i>Guess</i>			
WAS THE PHENOMENON IN SIGHT CONTINUOUSLY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF "NO," INDICATE WHETHER THIS IS DUE TO YOUR MOVEMENT OR THE BEHAVIOR OF THE PHENOMENON, AND DESCRIBE SUCH MOVEMENT OR BEHAVIOR. INDICATE DISAPPEARANCES ON PREVIOUS SKETCHES.			
<i>This Phenomenon was in no motion when I first saw it. about 5 seconds after seeing it, it began to move and began to change to an orange color and speeded up to a very fast speed. I was standing still.</i>			

10. IF THERE WERE MORE THAN ONE PHENOMENON, HOW MANY WERE THERE? DRAW A PICTURE TO SHOW HOW THEY WERE ARRANGED. DID THIS ARRANGEMENT CHANGE DURING THE SIGHTING?

There was only one phenomenon.

11. CONDITIONS (Check appropriate blocks.)

A. SKY		B. WEATHER	
<input type="checkbox"/> DAY		<input type="checkbox"/> CUMULUS CLOUDS (Low fluffy)	<input type="checkbox"/> FOG OR MIST
<input type="checkbox"/> TWILIGHT		<input type="checkbox"/> CIRRUS CLOUDS (High fleecy or Herring-bone)	<input type="checkbox"/> HEAVY RAIN
<input checked="" type="checkbox"/> NIGHT			<input type="checkbox"/> LIGHT RAIN OR DRIZZLE
<input checked="" type="checkbox"/> CLEAR		<input type="checkbox"/> NIMBUS CLOUDS (Rain)	<input type="checkbox"/> HAIL
<input type="checkbox"/> PARTLY CLOUDY		<input type="checkbox"/> CUMULONIMBUS CLOUDS (Thunderstorms)	<input type="checkbox"/> SNOW OR SLEET
<input type="checkbox"/> COMPLETELY OVERCAST		<input type="checkbox"/> HAZE OR SMOG	<input type="checkbox"/> UNKNOWN
			<input checked="" type="checkbox"/> NONE OF THE ABOVE

C. IF THE SIGHTING WAS AT TWILIGHT OR NIGHT, WHAT DID YOU NOTICE ABOUT THE STARS AND MOON?

(1) STARS	(2) MOON
<input type="checkbox"/> NONE	<input type="checkbox"/> BRIGHT MOONLIGHT
<input type="checkbox"/> A FEW	<input type="checkbox"/> MOON WITH HALO
<input checked="" type="checkbox"/> MANY	<input type="checkbox"/> MOON HIDDEN BY CLOUDS
<input type="checkbox"/> UNKNOWN	<input type="checkbox"/> PARTIAL (New or quarter)

D. IF SIGHTING WAS IN DAYLIGHT, WAS THE SUN VISIBLE? ☐ YES ☐ NO. IF "YES," WHERE WAS THE SUN AS YOU FACED THE PHENOMENON?

<input type="checkbox"/> IN FRONT OF YOU	<input type="checkbox"/> TO YOUR RIGHT	<input type="checkbox"/> OVERHEAD (Near noon)
<input type="checkbox"/> IN BACK OF YOU	<input type="checkbox"/> TO YOUR LEFT	<input type="checkbox"/> UNKNOWN

E. SPECIFY THE MAJOR SOURCE OF ILLUMINATION PRESENT DURING THE SIGHTING, SUCH AS THE SUN, HEADLIGHTS OR STREET LAMP, ETC. FOR TERRESTRIAL ILLUMINATION, SPECIFY DISTANCE TO LIGHT SOURCE.

There were ~~11~~ 2 street lights, the closest was about 20 yards away.

12. GIVE A BRIEF DESCRIPTION OF THE PHENOMENON, INDICATING WHETHER IT APPEARED DARK OR LIGHT, WHETHER IT REFLECTED LIGHT OR WAS SELF-LUMINOUS AND WHAT COLORS YOU NOTICED. DESCRIBE YOUR IMPRESSION OF WHETHER IT WAS SOLID OR TRANSPARENT, WHETHER EDGES WERE SHARP OR FUZZY. DESCRIBE THE SHAPE OR INDICATE IF IT APPEARED AS A POINT OF LIGHT. INDICATE COMPARISONS WITH OTHER OBSERVED OBJECTS, LIKE STARS, A LIGHT OR OTHER OBJECT IN YOUR FIELD OF VIEW.

At first sight it was a bright white and turned to an orange. It was a self-luminous object, the outside was a solid like a flying plate. The object was a lot brighter than the light by the road.

13.	DID THE PHENOMENON	YES	NO	UNKNOWN
	MOVE IN A STRAIGHT LINE?	*		
	STAND STILL AT ANYTIME?	*		
	SUDDENLY SPEED UP AND RUN AWAY?	*		
	BREAK UP IN PARTS AND EXPLODE?		*	
	CHANGE COLOR?	*		
	GIVE OFF SMOKE?	-	*	
	CHANGE BRIGHTNESS?	*		
	CHANGE SHAPE?		*	
	FLASH OR FLICKER?		*	
	DISAPPEAR AND REAPPEAR?		*	
	SPIN LIKE A TOP?		*	
	MAKE A NOISE?		*	
	FLUTTER OR WOBBLE?		*	

14. WHAT DREW YOUR ATTENTION TO THE PHENOMENON?

One of the boys I was with saw it and called our attention, he was about 10 years old.

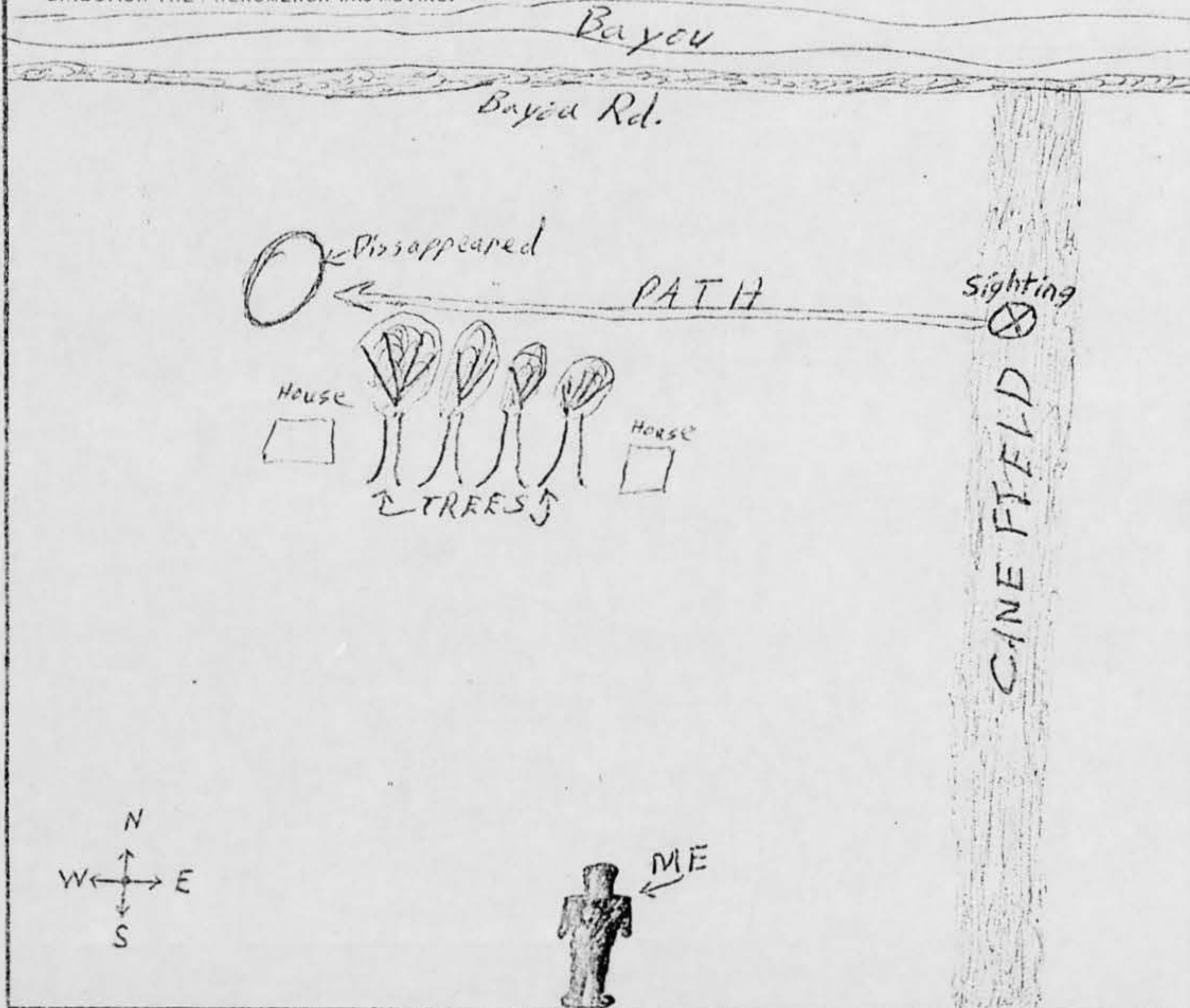
A. HOW DID IT FINALLY DISAPPEAR?

It picked up speed and disappeared in a few seconds.

B. DID THE PHENOMENON MOVE BEHIND OR IN FRONT OF SOMETHING, LIKE A CLOUD, TREE, OR BUILDING AT ANY TIME?  
☐ YES ☒ NO. IF "YES," DESCRIBE.

or  
 It went about 20 feet above + ~~666~~5 trees

15. DRAW A PICTURE THAT WILL SHOW THE SHAPE OF THE PHENOMENON. INCLUDE AND LABEL ANY DETAILS THAT MIGHT HAVE APPEARED AS WINGS OR PROTRUSIONS, AND INDICATE EXHAUST OR VAPOR TRAILS. INDICATE BY AN ARROW THE DIRECTION THE PHENOMENON WAS MOVING.



16. WHAT WAS THE ANGULAR SIZE? HOLD A MATCH AT ARM'S LENGTH IN FRONT OF A KNOWN OBJECT, SUCH AS A STREET LAMP OR THE MOON. NOTE HOW MUCH OF THE OBJECT IS COVERED BY THE HEAD OF THE MATCH. NOW IF YOU HAD BEEN ABLE TO PERFORM THIS EXPERIMENT AT THE TIME OF THE SIGHTING, ESTIMATE WHAT FRACTION OF THE PHENOMENON WOULD HAVE BEEN COVERED BY THE MATCH HEAD.

THE Fraction covered would be about  
 $\frac{1}{10,000}$ th

17. DID YOU OBSERVE THE PHENOMENON THROUGH ANY OF THE FOLLOWING? INCLUDE INFORMATION ON MODEL, TYPE, FILTER, LENS PRESCRIPTION OR OTHER APPLICABLE DATA.			
<input checked="" type="checkbox"/> NO	EYEGASSES	<input checked="" type="checkbox"/> NO	CAMERA VIEWER
<input checked="" type="checkbox"/> NO	SUNGLASSES	<input checked="" type="checkbox"/> NO	BINOCULARS
<input checked="" type="checkbox"/> NO	WINDSHIELD	<input checked="" type="checkbox"/> NO	TELESCOPE
<input checked="" type="checkbox"/> NO	SIDE WINDOW OF VEHICLE	<input checked="" type="checkbox"/> NO	THEODOLITE
<input checked="" type="checkbox"/> NO	WINDOWPANE	<input checked="" type="checkbox"/> NO	OTHER
A. DO YOU ORDINARILY WEAR GLASSES? <input type="checkbox"/> YES <input type="checkbox"/> NO		B. DO YOU USE READING GLASSES? <input type="checkbox"/> YES <input type="checkbox"/> NO	
18. WHAT WAS YOUR IMPRESSION OF THE SPEED OF THE PHENOMENON? GIVE ESTIMATE OF SPEED <u>200 Plus</u>		19. WHAT WAS YOUR IMPRESSION OF THE DISTANCE OF THE PHENOMENON? GIVE ESTIMATE OF DISTANCE <u>300 yds.</u>	
20. IN ORDER THAT WE MAY OBTAIN AS CLEAR A PICTURE AS POSSIBLE OF WHAT YOU SAW, DESCRIBE IN YOUR OWN WORDS A COMMON OBJECT OR OBJECTS WHICH, WHEN PLACED IN THE SKY, SIMILAR TO WHERE YOU NOTED THE PHENOMENON, WOULD BEAR SOME RESEMBLANCE TO WHAT YOU SAW. DESCRIBE SIMILARITIES AND DIFFERENCES BETWEEN THE COMMON OBJECT AND WHAT YOU SAW.			
<p>If there was a plate as big as 75 ft. across and 75 ft. wide and 10 to 15 feet thick placed at a distance of 100 ft. away it would be just like what I saw.</p>			
21. DID YOU NOTICE ANY ODOR, NOISE, OR HEAT EMANATING FROM THE PHENOMENON OR ANY EFFECT ON YOURSELF, ANIMALS OR MACHINERY IN THE VICINITY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF "YES," DESCRIBE.			
A. DID THE PHENOMENON DISTURB THE GROUND OR LEAVE ANY PHYSICAL EVIDENCE. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF "YES," DESCRIBE.			